

SUBMIT IN DUPLICATE

SCHEDULE OF LOOSE AND SMOKELESS TOBACCO DELIVERED TO CUSTOMERS LOCATED OUTSIDE GEORGIA

DISTRIBUTOR			CITY		RETURN FOR MONTH/YEAR OF:	
INSTRUCTIONS: 1. Each invoice of shipment involving physical movement to points outside the State of Georgia, is to be reported separately and must be supported by attaching hereto a legible copy of sales invoice. 2. Each credit memorandum issued for loose/smokeless tobacco returned by out-of-state customer must be entered as a negative amount in brackets () and deducted. 3. A separate sheet must be completed for each state where deliveries were made during the month covered by this schedule.						
LINE #	INVOICE DATE	INVOICE NUMBER	DATE DELIVERED	SOLD TO (NAME / CITY)	LOOSE TOBACCO (Wholesale Cost Price)	SMOKELESS (Wholesale Cost Price)
1.					\$	\$
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						
21.						
22.						
23.	PAGE TOTALS (Enter grand totals on line 3 of summary page)				\$	\$

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